PTO/SB/17 (11-00)
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illection of information unless it displays a valid OMB control number.

FEFE TRANSMITTAL for FY 2002		Complete if Known			
KA E TOTAL SITTE		Application Number	10/023,584		
for FY 2002		Filing Date	December 21, 2001		
(Substitute form)	•	First Named Inventor	Rosen et al.		
		Examiner Name	Unassigned		
\$ 1	Sion.	Group Art Unit	Unassigned		
Total prior of payment	\$ 0.00	Attorney Docket Number	PF112P1D2		

METHOD OF PAYMENT		FEE CALCULATION (continued)					
1. The Commissioner is hereby authorized to charge		ADDITI	ONAL				
indicated fees and credit any overpayments to:		Large		Small	Fee Description	ED	
Deposit Account Number 08-3425	Fee	Entity Fee	Fee	Entity Fee	RECEIV	Fee Paid	
Deposit Account Name Human Genome Sciences, Inc.		(\$)	Code	(\$)	Fee Description	Fee Paid	
☐ Charge Any Additional Fee Required	105	130	205	65	Surcharge - late filing fee or oath Surcharge - late provisional filing fee B 2 6 2	JUZ	
Under 37 CFR §§ 1.16 and 1.17	127	50	227	25	Surcharge - late provisional filing fee of		
Applicant claims small entity status.	139	130	139	130	cover sheet Non-English specification Utility issue fee (or reis FCH CENTER 1	300 m	
See 37 CFR 1.27	142		242	640	Utility issue fee (or reissue CH CENTER	JUUI	
	195	300	195	300	Publication fee for early, voluntary, or normal		
					publication		
2. Payment Enclosed:	179	740	279	370	Request for Continued Examination (RCE)		
	098	130	098	130	Processing fee, except in provisional applications		
☐ Check ☐ Credit Card ☐ Money Order ☐ Other FEE CALCULATION		180	126	180	Submission of Information Disclosure Statement		
	126		123	50	Processing fee for provisional applications		
BASIC FILING FEE Large Entity	1		246	370	Filing a submission after final rejection		
	146	740	246	3/0	(37 CFR 1.129(a))		
Fee Fee Fee Fee Description Fee Pai	1 149	740	249	370	For each additional invention to be examined (37 CFR 1.129(b))		
Code (\$) Code (\$) 101 740 201 370 Utility filing fee	145	100	145	100	Certificate of correction		
	147		147	2,520	Request for ex parte reexamination		
106 330 206 165 Design filing fee	099		099	8,800	Request for inter partes reexamination		
108 740 208 370 Reissue filing fee	148	110	248	55	Statutory disclaimer		
	115	110	215	55	Extension for reply within first month		
	116	400	216	200	Extension for reply within second month		
SUBTOTAL (1) \$0.0	0 117		217	460	Extension for reply within third month		
2. EXTRA CLAIM FEES	118		218	720	Extension for reply within fourth month		
Eutro Foo from				980	Extension for reply within fifth month		
Claims below Fee Par	d 128	1,960	228				
Total Claims -20 \$18.00	119	320	219	160	Notice of appeal		
Independent -3' \$84.00	126	320	220	160	Filing a brief in support of an appeal		
Claims	12	280	221	140	Request for oral hearing		
Multiple Dependent \$280.00	12:	2 130	122	130	Petitions to the Commissioner		
	14	0 110	240	55	Petition to revive unavoidably abandoned		
Large Entity Small Entity	14	0 110	210		application Petition to revive unintentionally abandoned		
Fee Fee Fee Fee Code (\$)	14	1,280	241	640	application		
	09	1 1,280	091	1,280	Acceptance of an unintentionally delayed claim for		
	56			3	priority Printed copy of patent, regular service		
102 84 202 42 Independent claims in excess of 3					Recording each natent assignment per property		
104 280 204 140 Multiple dependent claim, if not pa	id 58	1 40	481	40	(times number of properties)		
108 84 209 42 Reissue independent claims over	r Othe	er fee (specif	ỳ):				
original patent 110 18 210 9 "Reissue claims in excess of 20							
and over original patent		er fee (specif	y):				
		For Came	6.A.			}	
SUBTOTAL (2) \$0.0	Othe	er fee (specif	y).			<u> </u>	
			1. 12111	F D-: 1	SUBTOTAL (3)	\$ 0.00	
or number previously paid. if greater; For Reissues, see above		duced by Ba	isic Filing	ree Paid	SUBTUTAL (3)	φ υ. υυ	

Submitted By Complete (if applican						
Name (Print/Type) Michele M. Wales A Pogistration No.: 43,975	Telephone 301-610-5772					
	Date: 01/23/07					
Signature: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Duite. Crifacilities					